## CHAPTER 13

# MIDDLE EAST: THE DESERT CAMPAIGNS

WITHIN a month of their evacuation from France, certain Army nursing units were on their way out to Egypt and the Middle East.

Before proceeding to detailed narrative, let us endeavour to grasp the exact scope and significance of the expression 'Middle East'. It was an elastic term in those days, and covered every theatre of war, small or great, in North, West, and East Africa; in Iraq, Persia, Syria, and Palestine. (For good measure we may throw in the small island of Mauritius, far out in the Indian Ocean.) Q.A.I.M.N.S. served in every one of these areas.

Medical and nursing service under such varied conditions was to be very different from that hitherto experienced in the highly modernized terrain of Western Europe, with its hedge-lined, metalled country roads and built-up urban areas. Nursing Sisters might find themselves quartered now in an occasional marble palace, in wooden huts, in tents with no floors, in native mudhuts specially built for them, in houseboats moored to a riverbank, at a casualty clearing station in the Western Desert, or in a sunken tent, concreted and furnished with 'rabbit-hole' dugouts to sleep in.

They would meet warriors of almost every race, colour, and creed, and would nurse countless patients of whose language they were as ignorant as their patients were of theirs. Their duties would be carried out in every variety of climate, from fierce heat to bitter cold, and, in North Africa, in inches of mud, amid which the only rational nursing uniform would consist of service slacks and gum-boots. They would be plagued by mosquitoes, ants, scorpions, and other even less respectable insects, and would be-

come acquainted with diseases, such as typhus, hitherto unknown to them. But the Q.A.s accepted the prospect with complete equanimity, even eagerness. It was all part of the great adventure.

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The Middle Eastern theatre was of vital importance to the Allies. It was certain that as soon as Mussolini decided that he was betting on a certainty, Italy would declare war on Britain and France, thus imperilling Allied control of the Mediterranean, the Suez Canal, and all direct communication with India and the East.

The situation was rendered more difficult—desperate, in fact—by the collapse of France and the setting up of the Vichy Government. The defence of the Eastern Mediterranean had been left very largely to French troops, with the result that in June 1940 General Wavell, Commander-in-Chief Middle East, found himself bereft at a single stroke of the greater part of his command and opposed by a force of some 415,000 Italian troops, distributed over Libya and Italian East Africa. His own remaining forces comprised about 118,000 men, British, Dominion and Indian, most of them half trained and only partially equipped, spread thinly over Egypt, Sudan, and Palestine.

There was only one thing to be done in the circumstances, and the British Government did not hesitate to do it: they immediately dispatched further troops to the Middle East, ill though these could be spared from the protection of Britain, now lying

wide open to invasion by sea and air.

Three months of acute anxiety and suspense followed, for these reinforcements had to travel the long and perilous road round the Cape of Good Hope, and might arrive too late. Fortunately the Italians showed no immediate desire to take the initiative. Meanwhile General Wavell was able to make full use of the opportunity to train his available forces in the unfamiliar art of desert warfare.

The reinforcements duly arrived, and by December 1940 the odds against our Army in Egypt had been reduced to about two

to one. General Wavell felt that this was good enough, and decided to take the offensive himself. The result was a resounding victory; the destruction of an Italian Army of nearly ten divisions; the capture of 130,000 prisoners, and a westward advance of 500 miles. It was our first military success of the war; the story rang round the world, and the prestige of the British soldier was restored. Best of all, the soldier himself became imbued with a new spirit of confidence and will to win.

It was a truly auspicious beginning, but much had to happen, and many vicissitudes of fortune be endured, before the final victory. More than once during those years, it will be remembered, our desert forces were pressed back, after a successful advance, to the Egyptian frontier—at one time the catch-phrase of the moment was 'Benghazi and back!'—for not only had our War Cabinet considered it necessary, for political reasons, to divert the greater part of General Wavell's victorious 'Army of the Nile' to the assistance of Greece (General Wavell himself being transferred to India), but the Germans had taken over the direction of the North African campaign from their incompetent Allies. In due course Marshal Rommel, with his formidable Afrika Corps, fully motorized and well supplied with the most modern tanks, regained all, and more, than the Italians had lost.

So serious did the situation become that in the summer of 1942 the British and Dominion forces were compelled to retire to El Alamein, a prepared defensive position lying within Egyptian territory, between the impassable Quattara Depression and the sea. Here they stood fast, repelling every attack, while at home in Britain the munition factories worked night and day to equip our new divisions, and transports, in an increasing stream, conveyed men and munitions round the Cape and up the Red Sea.

In Egypt General Alexander, the newly appointed Commanderin-Chief Middle East, was achieving a miracle of reorganization, while General Montgomery built up and trained the Eighth Army—destined to achieve enduring fame in the years to come.

By October 23rd, 1942, all was in readiness, and Montgomery struck back at Rommel. The rest is history, for after the opening victory of El Alamein the Eighth Army, supported throughout by the coastwise aid of the Royal Navy, swept the enemy out of Libya and Cyrenaica in an advance of some 2,000 miles, which never ceased until Montgomery had joined hands with Anderson and the First Army in Tunisia, on April 7th, 1943.

Such, in brief outline, was the pattern of that immortal campaign. Let us now consider the service rendered therein, and some of the adventures encountered, by our Army Nursing

Services.

#### III

A Nursing Sister's expectation of adventure in the African campaign depended very largely upon two factors—in which period of that campaign she served, and where she found herself stationed.

Nursing units had arrived in the Middle East as early as 1936, in company with troops sent out from home to deal with any emergency that might arise from Italian designs upon Abyssinia or with Arab unrest in Palestine and Transjordania; but it was not until late 1939 that Q.A.I.M.N.S. arrived in any considerable numbers. Most of them were posted to hospitals in Cairo, or, a little farther afield, in the Nile Delta and Suez Canal Zone. They had no call to penetrate westward, for uneasy peace still reigned between ourselves and the Italians.

Here is a picture of a typical General Hospital of the Middle East at that time—No. 6 General—situated near Quassaseu in the Canal Zone, and opened in early 1940. It stood in a large military camp where troops were being assembled, trained, and equipped against the moment—the inevitable moment, all felt—when they would be dispatched to deal with an Italian invasion. It was also employed later as a rest-camp for troops who had been in action.

At first the hospital was composed mainly of tents; the permanent buildings were in course of erection but not yet completed. It was designed to accommodate 1,200 patients, and be capable if necessary of expanding to 2,000. In total war no one can foresee the extent of casualties: the safest plan is to overestimate them.

Besides the tents there were a number of Nissen huts—those useful arched structures of corrugated iron which were to become such a familiar feature of every British theatre of war. These held twenty-four beds apiece, or could be divided up into smaller and separate rooms for the accommodation of isolation cases. They also housed the operating theatre, the X-ray department, and the laboratory. At first the only internal illumination was from hurricane lamps, as in the days of Florence Nightingale: in due course, however, electric lighting was laid on throughout.

Nissen huts were employed in various other ways. One served as a dining-hall for convalescent patients, and for the giving of entertainments. Another was the Hospital Chapel, and much loving attention was lavished here. At first there was no altar—merely a wooden table—but later a quite ornate structure of bricks and concrete was set up by Italian prisoners. Chairs were contributed by British Red Cross and the Order of St. John of Jerusalem. The Sisters themselves helped to make the curtains and altar-cloths.

Each of the hospital tents accommodated twenty patients, and was sunk about five feet into the ground, as a precaution against bomb-blast. At first the floors were composed merely of the sand and rock of the desert: later, concrete roofs and bomb-proof walls were added.

The Sisters themselves lived in square tents, sunk as usual some feet into the sand, furnished with camp equipment, and accommodating two or three. For their meals and recreation they were provided with one of the invaluable Nissen huts.

Presently the hospital was in full operation, for Mussolini declared war in June, and desert fighting began at Mersa Matruh, just beyond the Egyptian western frontier.

Towards the middle of October [one Sister tells us], we began to receive, nightly, small convoys of surgical walking cases passed on from Casualty Clearing Stations and Base Hospitals nearer to the north coast. These men travelled by ordinary passenger trains, often taking two hours for the journey and making at least two changes *en route*. Accom-

modation was very limited, and they seldom got a seat. They were met by trucks at the nearest halt, and conveyed

to the Hospital.

About this period, and always in the early morning hours, we began to get air-raid alerts, and the men had to be guided and put to bed in complete darkness.

Towards Christmas 1940 a fresh variety of patient was introduced into the hospital, in the persons of a large number of prisoners of war. Many of these were Italian-trained native troops: they spoke no language but their own, and were disconcertingly allergic to the niceties of European civilization. Bedclothes and pyjamas were a complete mystery to them. Blankets they came to understand, but not pyjamas. In every case the patient insisted upon wrapping these round his head and keeping them there. The explanation, when discovered, was simple enough. A member of this particular tribe, it appeared, could not, upon religious grounds, go bareheaded—hence the pyjama swathings. Soon turbans were devised from towels, and all was well.

The behaviour of the next contingent of prisoners was even odder, though these should have known better. They were Italian officers, and were convinced, to a man, that Q.A.I.M.N.S. were out to poison them. Such is the power of propaganda. Over and over again a Sister was herself compelled to take a sip out of a medicine glass, as a guarantee to a resisting patient that the potion it contained was not lethal.

As for the Italian rank-and-file, once they had been persuaded that they would not be poisoned or handed over to a firing-squad, they were happy enough. None of them seemed to take the slightest interest in the war, and turned with relief and efficiency

to such congenial jobs as cooking and waiting at table.

Presently General Wavell launched his great offensive, and casualties began in earnest. Fortunately the hospital was now fully prepared for them. A very efficient system was organized to get the men to bed as quickly as possible: after food and a cigarette they soon fell asleep. Besides being wounded they



The Hospital Ship Leinster at Akureyri, Iceland, March, 1941



Serving patients' meals in the ward, No. 94 General Hospital, North Algiers, November, 1943 (Imperial War Museum)



British Red Cross nurses in Sicily, one hour's ride from the front line (Imperial War Museum)



"Q.A.s" in Normandy, July, 1944. With R.A.M.C. orderlies, carrying out a patient after the operation (*Photographic News Agencies, Ltd.*)

were dead tired, but wonderfully cheerful under the stimulus of victory. It should be added that these patients, in time, included representatives of almost every one of the Allied Nations and British Empire—not only from the great Dominions and India, but from Greece, Poland, Czechoslovakia, Mauritius, Malaya, China, Free France, Syria, Palestine and Malta.

A word may appropriately be said here regarding the immense strides made in recent years in the treatment of wounds and of sickness arising from active service conditions, especially in hot climates.

First came the miracles performed by blood-transfusion. This was a very highly organized service, for its success depended largely upon prompt action. Special orderlies were trained for it, and there were 'Central Blood Banks', where blood could be obtained as required. In the forward areas special tents were set aside for purposes of reception and resuscitation. Abdominal cases, which usually involve great loss of blood, were received into previously warmed beds, where the transfusion was given at once and the patient treated, at the same time, for shock. The operation was performed as soon as the surgeon and anæsthetist pronounced him fit. In former days the man would probably have died from loss of blood and shock.

Chest and facial wounds were treated with the same care and modernity of method. For chest cases oxygen was always available, and the surgical staff in the facial-maxillary centres always included an experienced dental surgeon.

Incidentally, the principal Chest Hospital for the Middle East Forces was situated upon the summit of Mount Scopus in Palestine. It was originally a palace, built for Kaiser Wilhelm, possibly in anticipation of the day when he should feel qualified to proclaim himself Spiritual Overlord of Christendom. He never occupied it.

On the medical side, the principal menace of the serving soldier in the Middle East were dysentery and malaria.

The treatment of dysentery had been revolutionized by the use of the drug Sulphanilamide, coupled with careful dieting, rest, and isolation. Much, too, was achieved by rigid preventive methods. Some of these, as we know, dated back to Florence Nightingale—Sanitas Sanitatum! Omnia Sanitas!—but they were now rendered trebly efficacious by the systematic elimination of flies, thorough washing of all fruit, and the use of no drinking water other than that approved by the medical authorities.

Malarial fever was now diagnosed and dealt with far more accurately and scientifically than before. In many cases the attack was recurrent, and in former days had been treated by dosing the patient with quinine until he recovered. Now more scientific methods were employed. As soon as a man was thought to be suffering from an approach of malarial fever, a blood-slide was taken, and repeated every two hours until the diagnosis was confirmed. Then followed the appropriate treatment, dependent upon the type diagnosed. The patient was kept in bed for at least four days, and treated with plenty of fluids, together with glucose, salt, and alkali. Aspirin, unknown a generation ago, was available to relieve the inevitable severe headache.

Such were a few of the benefits bestowed upon the modern soldier by scientific research. They had certainly improved a sick or wounded man's expectation of life out of all knowledge. In the great General Hospital just described, only six patients died during the first year.

#### IV

Let us pass now to the other end of the scale, by advancing from the base to the front and studying the activities of what was known as a Mobile Military Hospital. We must advance, too, a year or more in time, for these institutions did not come into being until El Alamein and General Montgomery's subsequent triumphal progress to Tripoli and Tunis.

The earliest, and perhaps the most famous Mobile Military Hospital—or 'Freak Unit', to employ the sobriquet so ungallantly bestowed upon it—was No. 1. It came into active

existence in the autumn of 1942.

Early in October [we are informed by the Sister who tells

the story] rumours began, since we had discharged but did not immediately re-admit. We were quite sure that an Army move was impending, and that we should move forward to deal with direct battle casualties.

It was an exciting prospect, but the rumours received no encouragement, and presently died down. But they began again towards the end of the month, following upon a notable increase in the number of British bombers passing overhead nightly. Then—

One morning the Commanding Officer told me that when the Eighth Army advanced we might reasonably expect to go with it!

This was tremendous news indeed, and was confirmed by an official intimation that the Sisters must provide themselves with some different uniform than grey cotton frocks and scarlet capes. The reasons for the order were obvious.

The frocks were thin, and would be very cold in the winter in the open. The Air Force, moreover, complained that they were too easily visible from the air. We would have practically no laundry facilities. Dresses of any kind are not suitable when nursing stretcher cases. (We had found in Belgium that the men were very embarrassed when the Sisters were attending to a patient on a stretcher next to or near-by.) As we should be travelling in lorries or ambulance cars, dresses were not practical.

The upshot of it all, of course, was service slacks and battle blouses, and thus sensibly arrayed Q.A.I.M.N.S. advanced into action.

But not immediately. The Battle of El Alamein had begun upon October 23rd, and the Eighth Army was somewhere far beyond the desert horizon by the time our impatient Freak Unit was called upon to make a move. This was on December 4th,

when the Sisters were embarked at Alexandria upon the Hospital Ship *Llandovery Castle*, to find themselves two days later at Tobruk, which had fallen to the enemy six months before and had recently been recaptured, after hard fighting, by the Eighth Army.

Needless to say, that historic seaport showed considerable signs

of wear and tear.

I myself counted 72 partially sunk ships in the harbour, and was told that there were many more sunk out of sight. Not one building seemed to be intact, but on one less damaged building proudly flew the White Ensign that denotes

Navy House.

We disembarked in barges, which carried us to a badly shattered jetty—merely a series of planks laid over old oil barrels and stretching out into the harbour. Along these planks we walked slowly and carefully, carrying our suitcases in one hand and balanced on the other by our everpresent respirators and steel helmets.

Two days later the Sisters left camp and set out (under the envious glances, we are told, of the Sisters of No. 14 Casualty Clearing Station, who were still clad in grey and scarlet) in full pursuit of the Eighth Army.

Two Sisters travelled in each ambulance. During daylight and

while on the move, both sat in front with the driver.

We wore our anti-gas glasses to protect our eyes from sand, but that did not prevent a layer from adhering to our faces.

At night they slept inside the ambulance, each on a stretcher. Each Sister had her bedding-roll, suit-case, and two-gallon water container—this last for the purpose of her rather sketchy ablutions.

On they went, day after day, through Derna, over Halfaya Pass, and finally to Benghazi, where they found that they had overtaken the Eighth Army at last and that their hospital was all set up and waiting for them. They had already covered 650 miles—eight days of travel by sea and road—a very fine road, constructed by Italian engineers.

The hospital tents, they found, contained some 300 patients, all bed cases. The walking wounded were taken charge of by

a neighbouring field ambulance.

The patients were amazed to see us. We were the first white women most of them had set eyes on for many months. We heard many comments to the effect that now all would be well—that the Army couldn't retreat now that it had its Sisters up in the forward area.

No. I remained at Benghazi for another five weeks, which included Christmas and its accompanying festivities. Thanks to N.A.A.F.I. and the Red Cross, there were presents for all.

On Christmas Eve, when we could hope that all the patients were asleep, the Quartermaster and I loaded one of the cars with Christmas stockings, and set out to do a round of the hospital. At each ward tent we left a filled stocking for every patient, and either a pipe and tobacco or cigarettes. The stockings contained a piece of soap, a pair of socks, writing-paper, envelopes and a pencil.

Christmas Day itself the Sisters celebrated by discarding their slacks and gum-boots pro tem, and returning to their grey frocks

and white caps.

Early on Boxing Day, however, came a sharp and sudden reminder that a desert campaign is not all composed of parties and presents, and that the desert itself is not invariably a region of sand and sunshine.

I awoke feeling that something was wrong. Looking out of my tent, I saw that the entire camp was under water. I sat up in bed and turned back the blankets and put one foot on the ground, meaning to rescue my clothes before they

became soaked. Alas, instead of encountering the usual hard floor, my leg sank half-way to my knee in mud! With great difficulty I extricated myself and got into slacks and boots and proceeded to the hospital.

Torrential rain had flooded the camp so completely that it was found necessary to evacuate almost all the patients. The ground, moreover, had become so soft that none of the motor ambulances could reach the tents, and every patient had to be carried a distance varying from a quarter to half a mile to ground sufficiently hard to accommodate the ambulances. In one ward-tent the ground was so soft that the beds sank until the mattresses were level with the floor.

For some days the Sisters went about their duties without stockings, in their gum-boots, wearing their trouser-legs turned up above the knee. It was a thoroughly unpleasant experience, but a useful hardening process for even more strenuous adventures.

## $\mathbf{v}$

The forward march was resumed on January 10th, 1943. The convoy moved in three sections, with the Sisters in the second section.

The routine was always the same. Up at 6.0 a.m. and over to the cookhouse with tin plates or mess-tins for breakfast. At 6.30 the engines were warmed up, and by 7.0 we were on our way. We halted about 10.0 for a brief rest for the drivers, when cook always had a welcome cup of tea ready. Then on again until midday, and an hour's halt for dinner; then on until 4 p.m. when we camped for the night. The halt had to be made at this early hour so that a meal could be eaten, all vehicles overhauled, and the next day's water ration given out, as no lights could be shown after nightfall.

This water ration varied in quantity, and was seldom sufficient,

despite recent floods. At one time it fell to one half-pint a day for personal use.

First in priority came the vehicles, then the kitchen, then the operating theatres and wards, lastly unit personnel.

One small bowl of water was put out in the ward in the morning for surgical purposes. When washing patients, we took it in rotation which bed to begin with, as we could not afford fresh water for each patient. Head cases were welcomed, as they meant less washing!

We developed a special technique for washing-up dishes and cutlery. These would be plunged first into the sand, thereby removing most of the débris. When any tea was left over, this was utilized for dish-washing, to save water.

The convoy was close on the heels of the Eighth Army now. They were skirting the Gulf of Sirte and arrived presently at Sirte itself, which the Eighth Army had captured only the previous day. Here they camped beside the New Zealand Casualty Clearing Station, and took in some casualties from a recent tank engagement.

These men, in addition to wounds, were also badly burned. They were very plucky, and never made a murmur of complaint.

On the road to Sirte the convoy had received a gruesome reminder that they were now well within the battle zone.

By now the way was well posted with notices not to leave the roads, because of mines. A few days later I saw the result of not obeying the notices. A truck just ahead of the car in which I was travelling left the road for a small oasis, perhaps ten yards away. It had not gone five yards before it went over a mine. The driver was killed outright, and the man beside him received terrible multiple wounds: of the men in the back two died before we could get them out, and a third before he reached hospital.

Progress after Sirte was less rapid, for now the main road was periodically abandoned in favour of desert tracks. The pace of the convoy sometimes dropped to less than five miles an hour. The weather, though dry, had become bitterly cold, and a rum ration was regularly issued. The Sisters, we are told, were accustomed to 'camouflage' theirs with cocoa.

They were constantly passing old battlefields now, littered with the débris of conflict, including many tanks, overturned or blown to pieces. The swastika and the red, white, and blue circles lay side by side. On the edge of the field two sets of graves could be seen, one for the enemy and one for friends.

The fighting ahead grew fiercer, and casualties were coming back daily, to be evacuated eventually to Egypt by air. (Tobruk Harbour was not as yet regarded as safe for hospital ships.) Many of the wounded begged earnestly not to be sent back to rest: all they asked was to be patched up sufficiently to enable

them to participate in the capture of Tripoli.

On January 23rd came the news that the great event had taken place. The road was crowded with traffic of all descriptions—artillery, tank-transporters, ration and ammunition lorries. There was little or no 'convoy distance' now: everything seemed to be moving engine to tail and wing to wing. All concerned were delirious with excitement at the thought of their state entry into

the captured city.

The excitement even spread to the animal kingdom. Some time previously, in an abandoned village on the line of route, the Sisters had adopted a female pie-dog—or rather, the animal had adopted them. They christened her Bessie, and took her with them. Bessie's contribution to the great occasion took the form of no less than nine puppies, born, during the convoy's actual entrance into Tripoli, in a wooden box at the feet of a Sister in the leading ambulance.

No. I Mobile Military Hospital entered Tripoli at 10.30 a.m. on January 24th, feeling justly proud to be the first British medical unit to achieve such distinction. Our eight Nursing Sisters had been the first British women ever to make a desert crossing as

part of an Expeditionary Force. They had covered 1,221 miles in seven weeks, and had stood up to their duties as stoutly as any man.

### VI

With the capture of Tripoli and the occupation of Tripolitania, the Eighth Army were accorded a well-earned 'breather'. They were in great heart. Rommel and the Afrika Corps were still in full retreat, and the old unhappy routine of 'Benghazi and back' had been relegated to a memory of the past.

General Montgomery set up his headquarters in a field on the edge of the desert, with his men disposed about him for rest, refreshment, and re-equipment. On Sunday, January 30th, he held a Church Parade, followed by a review of the troops which

had taken part in the capture of Tripoli.

One of the Sisters and myself went down to the sea-front as spectators. While we were standing waiting for the march past, General Montgomery drove up. On getting out of his car, he walked across the road to shake hands and express his approval of the presence of the Nursing Sisters.

And this was not all. Four days later Mr. Winston Churchill himself paid a visit to Tripoli and reviewed the Eighth Army. This time all eight of the Sisters were present, as privileged spectators, on the steps of the Castle, and heard the Prime Minister, in a truly characteristic utterance, congratulate the troops on having 'nightly pitched their moving tent a day's march nearer home'!

No. I remained in Tripoli for six weeks, and then, having handed over to a base hospital which had now moved up, moved on to the Tunisian border, where they established and maintained a hospital of some 400 beds during the heavy fighting on the famous Mareth Line.

While in Tripoli they had at last succeeded, after endless applications to the D.D.M.S. Eighth Army, in getting themselves

issued with some sort of standard headgear, to go with their slacks and gum-boots. These took the form of black berets, hitherto the property and prerogative of the Tank Corps. Previously the Sisters had 'made do' by cutting off the tails of their shirts and

twisting them into some sort of turban.

The Mareth Line Hospital housed patients of all nationalities. both Allied and enemy. No special supervision was exercised over enemy patients, except that it was deemed advisable not to place Greek and Italian prisoners in adjoining beds. Germans, as usual, were chiefly concerned with themselves. One group had been told, and believed, that we wired the mouths of all prisoners to prevent them from talking!

The presence of the Sisters themselves in so advanced an area was still a source of wonder, incredulity indeed, to the troops.

In many cases we had to remove our head-scarves before the men would believe we were really women.

Their work during the Mareth Line fighting was heavy in the extreme. On April 7th, at the climax of the battle, the record number of 1,269 casualties passed through the unit; yet every man was fed, and all were washed and either received

theatre treatment or had their dressings renewed.

A week later the unit handed over to a South African Casualty Clearing Station and entered Tunisia on their way to a hospital west of Gabes, on the Tunisian coast. (En route they crossed a small stream—the first running water they had seen since Alexandria.) Their stay at Gabes was comparatively brief, but during that period they had the misfortune to lose the Sisters' Mess Tent, by fire, and with it their furniture, china, and a very precious sewing-machine.

Luckily, on their way through Sfax, they encountered a 'Mobile Officers' Shop', a novelty of that time—a lorry fitted up with shelves and cupboards containing shirts, socks, and the like. Its custodian possessed few articles of feminine attire, but was always prepared to take orders and execute them promptly.

From Sfax they proceeded to Sousse, and were in Sousse when

the African campaign came to its triumphant conclusion. The triumph was complete—so complete that enemy prisoners swamped their captors, and had to rove about in their own transport looking for the cages.

Peace reigned once more, from Casablanca to Cairo.

The quietness of that first night was most uncanny. It was here in the hospital at Sousse that we nursed the most severe cases. As there was no longer need to evacuate in order to have empty beds for further casualties, we were able to keep our cases until they were able to stand the trip back to Tripoli, or even right back to Alexandria.

On May 21st the unit handed over the hospital and its patients to a field ambulance of the First Army, and set out on the return

journey to Alexandria, its task completed.

It should be noted that the First and Eighth Armies, together with the Americans and Free French, had joined hands on April 7th, and that now all the forces concerned had been amalgamated into the 18th Army Group, under the supreme command of General Eisenhower. Thus the long and happy association of No. 1 Mobile Military Hospital and the Eighth Army had come to an end at last, to the genuine regret of all concerned.